

DELAWARE DEPARTMENT OF JUSTICE

JOB OPENING

Opening Date: March 30, 2021

Closing Date: April 14, 2021

SENIOR AUDITOR – PAY GRADE 19

Fraud & Consumer Protection Division

Medicaid Fraud Control Unit

New Castle County

Description of Duties:

The Delaware Department of Justice is seeking an exceptional and highly motivated individual to join the Medicaid Fraud Control Unit in the Fraud & Consumer Protection Division in the New Castle County office as a Senior Auditor. We seek an individual with a strong commitment to working in the public interest.

The Senior Auditor will be responsible for providing auditing and data analysis expertise in civil and criminal health care fraud investigations. The civil cases pertain to health care fraud and cases brought under the Delaware False Claims and Reporting Act. The criminal cases involve the prosecution of health care fraud, drug diversion, patient abuse and neglect, and financial exploitation. In addition, the Senior Auditor will be assigned to multijurisdictional *qui tam* cases managed by the National Association of Medicaid Fraud Control Units. The Senior Auditor will be a member of an investigative team responsible for compiling evidence of fraudulent activity throughout the Delaware Medicaid and Medical Assistance Program and other State and Federal programs. There is considerable teamwork involved in identifying, investigating, and litigating health care fraud. The ability to work independently and collaboratively as a member of a team is essential.

Specific duties for the position include the following: (1) managing the unit's data mining program including project proposals, project development, data analysis, coordinating data mining efforts with the state Medicaid agency, and projecting and tracking program costs and return on investment; (2) performing database queries to extract claims records and other data to support investigations; (3) analyzing varied and complex health care and financial data; (4) detecting and developing trends and patterns in health care claims data and financial records to identify evidence of fraud; (5) researching laws, policy, and regulations to facilitate claims analysis; (6) summarizing data using tables, charts, graphs, and other visualization methods, where applicable; (7) identifying and calculating restitution and damage figures; (8) preparing written reports and presenting findings to an investigative team; (9) preparing trial exhibits and testifying, as needed; (10) making program and policy recommendations; (11) coordinating with the state Medicaid agency and Medicaid Managed Care Organizations regarding policy, referrals, contracts, and requests for information; (12) providing technical expertise to multijurisdictional teams regarding Medicaid claims, policy, databases and systems, and related information; and (13) other duties, as assigned. It is encouraged that applicants submit a writing sample demonstrating proficiency in data analysis and report writing, but not required.

Minimum Qualifications:

- Possession of a Bachelor's degree or higher in Accounting, Business Administration, Economics, Finance, Business Management, Computer Information Systems or related field; equivalent work experience may be considered.
- Three years of experience in designing analytical studies, which includes determining study goals and objectives, information needed, data sources, and sampling and collection methods.
- Three years of experience in interpreting laws, rules, regulations, standards, policies, and procedures.
- Skill in planning, prioritizing, organizing, and problem solving.
- Ability to analyze data and make sound recommendations.
- Proficient in the use of software for data analysis, such as: Microsoft Excel, Microsoft Access, SAP Business Objects, Tableau, Cognos, SAS, SPSS, SQL, or other data analytics/statistical software.
- Experience collecting, analyzing, summarizing, and formatting large data sets.
- Experience in narrative report writing.

Preferred Qualifications:

- Knowledge of Medicaid, Medicare, general healthcare industry practices, and/or medical billing and coding concepts.
- Knowledge of statistically valid random sampling.
- Knowledge of Generally Accepted Accounting Principles (GAAP).
- Knowledge of inferential statistics such as correlation, t-tests, f-tests, or analysis of variance.
- Knowledge of descriptive statistics such as mean, median, mode, or standard deviation.

Internal Delaware Department of Justice Applicants: Please submit an updated Resume or summary of work experience to the Director of Human Resources.

External Applicants: Please submit Resume and the Delaware Department of Justice Application (please see link): <http://attorneygeneral.delaware.gov/executive/hr/job-application/>

OR External Applicants can mail Resume and the Delaware Department of Justice Application to: Delaware Department of Justice, Human Resources, 820 N. French Street, 6th Floor, Wilmington, DE 19801, OR E-mail to: DOJHR@delaware.gov OR Fax to: 302-577-5866. EOE.